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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE RECEIVED FAIR POLITICAL OTICES COMMISSION

Please type or print in ink.	COMHISSION
NAME OF FILER (LAST)	(FIRST) (MIDDLE)
Halliday I APR -	I AM II: 2Barbara
. Office, Agency, or Court	
Agency Name	
City of Hayward	
Division, Board, Department, District, if applicable	Your Position
City Council	Council Member
▶ If filling for multiple positions, list below or on an attachment.	
Agency:	Position:
. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge (Statewide Jurisdiction)
Multi-County	County of
☑ City of Hayward	Other
Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2010, through Decem 2010.	nber 31, Leaving Office: Date Left//(Check one)
The period covered is/, through Decem 2010.	ber 31, O The period covered is January 1, 2010, through the date of leaving office.
Assuming Office: Date/	The period covered is/, through the date of leaving office.
Candidate: Election Year Office sough	nt, if different than Part 1:
Schedule Summary	7
Check applicable schedules or "None."	➤ Total number of pages including this cover page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property – schedule attached	☐ Schedule E - Income — Gifts — Travel Payments — schedule attached
-or- ☐ None - No reportable	e interests on any schedule
·	
Verification	AVIT TID GODE
4	
Date Signed March 22, 2011 (month, day, year)	Signatur

SCHEDULE A-1 investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Barbara Halliday

•	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Principal Financial group	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
investment firm	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
∑ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Variable Annuity	NATURE OF INVESTMENT
Ottook	Stock Other (Describe)
(Describe) Partnership () Income Received of \$0 - \$499	Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Hewlett Packard	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
electronics manufacturer	
FAIR MARKET VALUE	FAIR MARKET VALUE
<u>\$2,000 - \$10,000</u> \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 10 / / 10	/ / 10 / / 10
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Sonic Foundry	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
software developer	
FAIR MARKET VALUE	FAIR MARKET VALUE
∑ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments: _

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Barbara Halliday

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED			
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
Principal Financial Group	Farm property rental			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
711 High Street, Des Moines, Iowa 50392	Marshall County, Minnesota			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION			
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED			
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,000 ☐ OVER \$100,000	☐ \$500 - \$1,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income			
Loan repayment Partnership	Loan repayment Partnership			
Sale of(Property, car, boat, etc.)	Sale of			
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more			
- INC. THEN LABORATE.				
	Other			
(Describe)	(Describe)			
	<u> </u>			
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO				
of a retail installment or credit card transaction, made	lending institutions, or any indebtedness created as part in the lender's regular course of business on terms			
	your official status. Personal loans and loans received			
not in a lender's regular course of business must be of				
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)			
	_			
ADDRESS (Business Address Acceptable)	%			
	SECURITY FOR LOAN			
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence			
	Real Property			
HIGHEST BALANCE DURING REPORTING PERIOD	Street address			
\$500 - \$1,000	City			
S1,001 - \$10,000	, , , , , , , , , , , , , , , , , , ,			
\$10,001 - \$100,000	Guarantor			
OVER \$100,000	☐ Other			
	Other(Describe)			
	Other(Describe)			

SCHEDULE D Income - Gifts

► NAME OF SOURCE	=		► NAME OF SOURCE	Ξ		
League of Cal	lifornia Cities		Hayward Firfefighters 1909			
ADDRESS (Business Address Acceptable)			ADDRESS (Business Address Acceptable)			
1400 K Street, Suite 400, Sacramento, CA 95814			22734 Main S	22734 Main Street, Hayward, CA 94541		
BUSINESS ACTIVITY, IF ANY, OF SOURCE			BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Education and	dadvocation fo	r cities in California	Firefighter Ass	sociation		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
1 , 21 , 10	\$25.00	lunch	1,30,10	<u>\$100</u>	dinner event	
4 , 8 , 10	\$25.00	lunch	4 , 23 , 10	\$ 50	lunch event	
6 , 17 , 10	\$25.00	lunch		\$		
► NAME OF SOURCE			► NAME OF SOURCE		<u></u>	
Steve Miller						
ADDRESS (Busines	s Address Acceptab	le)	ADDRESS (Busines	s Address Acceptab	ile)	
222 Country C	Club Drive, Hay	ward CA 94542				
BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	IRCE	
Real estate de	eveloper					
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
4 , 23 , 10	<u>\$40.00</u>	golf tournament tickets		\$		
9 , 1 , 10	<u>\$ 30.00</u>	lunch		\$		
	\$			\$		
NAME OF SOURCE			► NAME OF SOURCE			
ADDRESS (Business	s Address Acceptabl	(e)	ADDRESS (Busines:	s Address Acceptab	ole)	
BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	IRCE	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
	\$			\$		
	\$			\$		
	\$			\$		
Comments:						